Safe Transport of COVID+ Patients or PUIs

Updated December 21, 2020

What's changed: Updated process for transport of patients on CPAP or high flow nasal cannula

Scope: This document contains infection prevention protocols for transport of COVID-19+ or PUI patients. This includes routine transport by hospital transport staff as well as transport requiring a clinical escort. If a patient who is critically ill requires transport by hospital transport staff, transport staff are to remain at the head of the bed. Clinical care and monitoring are provided by clinical staff escorting the patient.

General Patient Transport Guidelines: Every effort should be made to avoid moving a COVID-positive or PUI patient from one location to another within the hospital. In general, any services should instead be brought to the patient location utilizing Standard, Contact and Droplet Transmission isolation procedures. Examples of diagnostic and care requirements that may mandate intra-hospital transfer might include:

- Emergency department to another unit
- Medical-surgical unit to ICU
- Nursing unit to the radiology department (use bedside scan whenever feasible)
- ED, ICU/Critical Care, or medical surgical unit to the operating room

Potential breaches in infection control measures can occur during episodes of patient transport outside of the isolation room. Additionally, provision of patient care may become complex should the patient condition begin to deteriorate during the transport process.

All colleagues who handle the transport of COVID-19 patients must consider the following principles:

- Early recognition of the deteriorating patient
- Contingency plans for medical emergencies during transport (qualified staff and appropriate equipment)
- Colleague safety from cross contamination
- Bystander safety (other colleagues) as the patient moves through common areas
- Post-transport decontamination of equipment utilized during transport

1. Steps to take when a clinical escort for transport is required:
   a. Determine the route that will ensure the least contact with other colleagues or visitors during the transport.
   b. Call ahead to ensure the receiving department is prepared to accept the patient to avoid having the patient wait in the hallway.
   c. Assess the stability of the patient immediately prior to transport.
   d. Arrange for clinical escort(s), i.e. Nursing, Respiratory Therapy, MD
   e. Ensure that appropriate supplies and equipment go with the patient (e.g. inclusion of portable defibrillator, bag-valve mask (Ambu bag, etc.) should the patient deteriorate during transport
   f. Ensure that the patient is masked
      i. If patient is unable to be masked (i.e. patient is ventilated) ensure adequate infection prevention control measures are implemented. If ventilated, the circuit should be
closed. HEPA filtration must be added to endotracheal tubes. Secure tubing prior to transport and monitor the connections throughout the transport process. HEPA filtration must be added to portable CPAP machines used for transport. A personal CPAP must not be used for transport. A clinical escort may accompany the patient to monitor tubing connections. Colleagues are to follow PPE guidelines as stated in the PPE Guidebook.

ii. Patients requiring high flow nasal cannula: If patient requires higher levels of O2 during transport, a non-rebreather (NRB) mask in combination with a standard nasal cannula (NC) may be used (for example, 25 liters O2 via NRB with 6 liters O2 via NC), if tolerated. The high flow nasal cannula may be transported with the patient for use during the procedure/test, depending on the length of the procedure/test. Colleagues are to follow PPE guidelines as stated in the PPE Guidebook.

2. Steps to take when no clinical escort is required (routine transport)

a. Nursing staff will be approached by the transporter that they are here to take the patient to a specific location. Transporters cannot assist with getting patients ready to go or with transfer to the wheelchair or cart and are not enter the patient room.

b. All nursing staff assisting with transfer of patient to wheelchair/cart need to be in PPE as stated in the PPE Guidebook. Clean hands and don required PPE.

c. Nursing staff ensures the patient is masked prior to transport. If a patient is unable or unwilling to wear a mask or face covering, the patient must have a clinical escort. Refer to 1. Steps to Take when a Clinical Escort for Transport is Required, above. See also Guidance for Dealing with People Who Refuse to Wear a Mask or other required PPE While in the Facility.

d. Nursing will get patient into their mode of transport and bring them directly outside of room to the transporter.

e. Transport staff:

   i. Follows PPE requirements for the care of PUIs and COVID-19+ patients as described in the PPE Guidebook

   ii. Performs hand hygiene

   1. Do not routinely wear gloves for transport due to risk of contamination to elevator buttons, hand rails etc.

   2. If needed, an escort should accompany the transport to complete these tasks.

   3. Transport staff may bring gloves with them in case of emergency. Gloves may be carried in the transport supply bag.

f. The transporter brings the patient to their destination using service elevators. No one else should be in the elevator with the transporter and the patient

gh. Receiving department (radiology, etc.) will wear PPE as described in the PPE Guidebook for COVID-19+ or PUI care.

h. After dropping off the patient, the transporter:

   i. Performs hand hygiene.
ii. Dons a pair of gloves.

iii. Disinfects the wheelchair or cart with an EPA-approved disinfectant against SARS-CoV-2. Observe and adhere to minimum contact times.

iv. Removes gloves.

v. Performs hand hygiene.

i. After the receiving department completes the procedure:
   i. The receiving department replaces the mask on the patient, if it was removed, and calls for transport.
   ii. The receiving department transfers the patient to the wheelchair or cart.
   iii. The receiving department notifies the patient's unit that the patient is returning
   iv. Upon arrival in the department, the transporter:
      1. Dons appropriate PPE per the PPE Guidebook
      2. Completes hand hygiene.
         a. Do not routinely wear gloves for transport due to risk of contamination to elevator buttons, handrails etc.
         b. If needed, an escort should accompany the transport to complete these tasks
         c. Transport staff may bring gloves with them in case of emergency. Gloves may be carried in the transport supply bag.
   v. Receiving department loads the patient into wheelchair or cart
   vi. Transports the patient out of the department.

j. After the patient has cleared the department with the transporter, the receiving department will disinfect the area using the between-case cleaning instructions in the Resuming Operations guidebook.

k. The transporter brings the patient to their destination using service elevators. No one else should be in the elevator with the transporter and the patient.

l. The transporter returns the patient inside the doorway to the patient room.

m. The transporter completes hand hygiene.

n. Nursing will don appropriate PPE as described in the PPE Guidebook to meet the patient and transfer the patient back to bed.

o. The nurse will doff PPE per guidelines.

p. Wheelchairs or carts must be disinfected with an EPA-approved disinfectant against SARS-CoV-2. Observe and adhere to minimum contact times.

Reference: